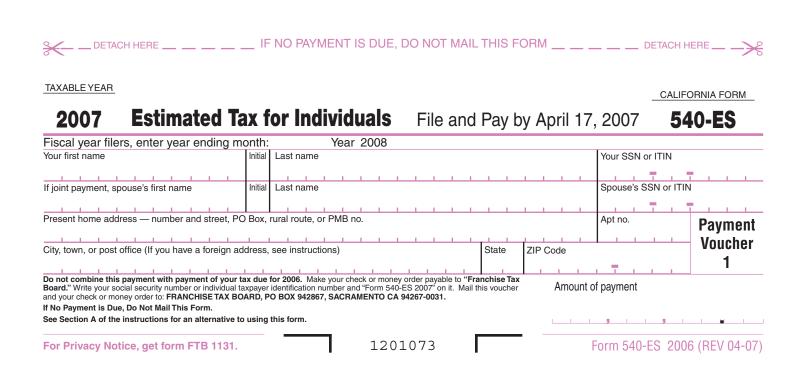
## 540-ES Voucher 1 at bottom of page



2007 Estimated Tax	for Individuals	File and Pay by	June 15, 2007	540-ES
Fiscal year filers, enter year ending month Your first name Initial			Your SSN	N or ITIN
If joint payment, spouse's first name Initia	Last name		Spouse's	SSN or ITIN
Present home address — number and street, PO Box	rural route, or PMB no.		Apt no.	Payment
City, town, or post office (If you have a foreign address	s, see instructions)	State 2	ZIP Code	Voucher 2
Do not combine this payment with payment of your tax due Board." Write your social security number or individual taxpaye and your check or money order to: FRANCHISE TAX BOARD, If No Payment is Due, Do Not Mail This Form.  See Section A of the instructions for an alternative to using	r identification number and "Form 540-E PO BOX 942867, SACRAMENTO CA 94	S 2007" on it. Mail this voucher	Amount of payment	
For Privacy Notice, get form FTB 1131.	1201	073		Form 540-ES 200
DETACH HERE	F NO PAYMENT IS DUE, D	OO NOT MAIL THIS FO	RM	. DETACH HERE
TAXABLE YEAR				CALIFORNIA FORM
2007 Estimated Tax	for Individuals	File and Pay by	Sept. 17, 2007	540-ES
Fiscal year filers, enter year ending month Your first name			Your SSN	N or ITIN
If joint payment, spouse's first name Initia	Last name		Spouse's	SSN or ITIN
Present home address — number and street, PO Box	rural route, or PMB no.		Apt no.	Payment
City, town, or post office (If you have a foreign address	s, see instructions)	State 2	ZIP Code	Voucher 3
Do not combine this payment with payment of your tax due Board." Write your social security number or individual taxpaye and your check or money order to: FRANCHISE TAX BOARD, If NO Payment is Due, Do Not Mail This Form.	r identification number and "Form 540-E PO BOX 942867, SACRAMENTO CA 94	S 2007" on it. Mail this voucher	Amount of payment	
See Section A of the instructions for an alternative to using For Privacy Notice, get form FTB 1131.	1201	073		Form 540-ES 200
DETACH HERE	F NO PAYMENT IS DUE, D	OO NOT MAIL THIS FO	RM	
<u>TAXABLE YEAR</u>				CALIFORNIA FORM
2007 Estimated Tax	for Individuals	File and Pay by	/ Jan. 15, 2008	540-ES
Fiscal year filers, enter year ending month Your first name			Your SSN	N or ITIN
If joint payment, spouse's first name Initia	Last name		Spouse's	SSN or ITIN
Present home address — number and street, PO Box	rural route, or PMB no.		Apt no.	Payment
City, town, or post office (If you have a foreign address	s, see instructions)	State 2	ZIP Code	Voucher 4
Do not combine this payment with payment of your tax due Board." Write your social security number or individual taxpaye and your check or money order to: FRANCHISE TAX BOARD, If No Payment is Due, Do Not Mail This Form.  See Section A of the instructions for an alternative to using	e for 2006. Make your check or money or r identification number and "Form 540-E PO BOX 942867, SACRAMENTO CA 94	S 2007" on it. Mail this voucher	Amount of payment	<u> </u>